

Going it alone



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wasn't getting her there

An ADHD coach shares her experience of working with a second-year medical student and the strategies that led to success

By Katherine McGavern

Feeling overwhelmed, discouraged, exhausted, and barely able to maintain passing grades after her first year of medical school, Susan (a pseudonym) submitted to an evaluation at the suggestion of her advisors and received an ADHD diagnosis. Floored, she turned to CHADD's professional directory and found Jane Milrod, a coach who works with adults and children affected by ADHD.

"This student's whole life was a story of huge struggles with undiagnosed ADHD," says Milrod. Her family and teachers saw her ADHD behaviors as moral failures—they thought she didn't care, she wouldn't try, she hated to work. Susan had managed to survive, however, thanks to her high intelligence, tenacity, and engaging personality. She had consistently surrounded herself with bright, conscientious peers who provided structure and support for her studying.

Now, however, Susan faced the major challenges of medical school, marriage, and living forty-five minutes away from campus. She could not overcome her biggest single ADHD demon: procrastination. Any task produced anxiety, which produced avoidance, which produced paralysis—and the very real possibility of flunking out.

For the first five months of their work together, Susan took a leave of absence from medical school to regroup. Milrod worked on two fronts: educating Susan about her ADHD brain (all new information) and helping her change her relationship with herself. They looked hard at all the steps in Susan's day, her routines (and lack thereof), her random eating and sleeping habits, the way she managed (and failed to manage) her time and responsibilities, her use of free time, and her relationships. Milrod helped Susan see the real-time impact of ADHD on every aspect of her life.

Exercise, eating, and sleeping well

The first addition to Susan's life was exercise, which turned out to be a game-changer. She quickly found that exercise gave her more energy, increased her mental alertness, improved her concentration, and made her "feel smarter." Knowing how important it is for a client to genuinely like how they exercise, Milrod encouraged her to try a wide variety of activities.

They learned early on that the gym was not the answer. Why? Because it was too easy to put off

leaving for the gym, until there wasn't enough time left for a workout. So, home exercise ideas included yoga, aerobics, walking the dog, jogging, and calisthenics, until Susan discovered that she really enjoyed doing exercise videos and enthusiastically adopted a daily routine. Exercising regularly at a scheduled time helped Susan to incorporate it into her life. The accountability factor was powerful: When she considered skipping a session, Susan realized she would have to admit it to Milrod, and the pain of having to do that motivated her to exercise after all.

In addition to regular exercise, Susan adopted more sensible eating and sleeping habits, once she realized that her ADHD impulsivity was working against her in both those categories.

Get a grip on your day

Next, Milrod helped Susan get her life in order. Not using a calendar produced all kinds of chaos, so they installed one on Susan's computer and cell phone. Susan began to use the reminder alarms to keep herself on track. They converted her random to-do lists into prioritized WHEN-to-do lists, and entered specific tasks into her calendar to ensure their completion. Each night Susan wrote a short must-do list for the next day and used it to keep herself on task throughout the day. She texted her daily progress to her coach, and once a week they reviewed her progress and set new goals together.



Are you pursuing the right goals?

Once Susan had achieved some stability with her living habits and self-organization, her coach delved deeper. She wanted Susan to think hard about her current choices, and to determine whether they resonated with her life goals for herself. Milrod had Susan write five entries a week on this subject in her journal. She asked Susan to write about what other choices she might make, about alternative goals or passions that were meaningful to her.

Through this two-month process, Susan was able to confirm for herself that medical school was in fact very much aligned with her life goals. At this point, Milrod asked Susan



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This Student's Path to Success

Through working with an ADHD coach, this medical student identified the ways her ADHD was impeding her success. Then she worked with her coach to develop strategies to address her problems.

REALIZATIONS/PROBLEMS

STRATEGIES

Can't go it alone

Coaching provides another set of eyes on life and a strong sense of accountability

Crazy lifestyle habits

Exercise regularly, on schedule
Sensible eating and sleeping

Tasks not getting done

Convert to-do list to when-to-do list
Set goals the night before, use alarms
Short daily must-do list
Text coach daily about progress
Weekly review with coach

Chaotic schedule

Manage calendar on computer and cell phone
Use reminders

Need to examine life goals

Journal writing and ultimately, contract with self

Need to respect own learning style

Classroom lectures create sensory overload, so downloaded lectures to iPod
Listen to recorded lectures in library, on a schedule
Listen while commuting, walking, on elliptical machine
Obtain extended time for tests
Work on big challenges right after exercising
Change learning and study venues—rooms, buildings, places
Memorize material to songs, chants
Recite material out loud to self to remember it
Draw diagrams and pictures to remember things
Use study buddies and study groups

Need to respect own energy fields

Rent room close to campus
Surround self with other med students

Need to respect own pacing needs

Follow twenty minutes of work with a five-minute walk or other diversion
Use a timer
Balance extracurricular activities
Take short walk before beginning large projects

Ruled out medication

Learn about all ADHD medications and work with ADHD-knowledgeable doctor to find right one

to write a contract with herself. The contract's purpose was to reinforce her purpose and the choices they involved, and it became a significant help to Susan throughout medical school, particularly when she was feeling overwhelmed or discouraged.

What's in your way? Fix it!

Back at school, Susan was much more mindful of how her ADHD affected her learning, and gradually developed more respect for her own learning style. With Milrod's help, Susan came up with multiple strategies to get the job done.

First she realized that she couldn't tolerate classroom lectures—they put her into sensory overload. The solution: Susan downloaded all her lectures onto her iPod, and then created a schedule for listening to them. To keep her attention focused, she listened to them in different venues—the library, the school gym while on the elliptical machine, different rooms in the house, the café, and on the road while commuting or walking.

Susan also arranged for extended time on her exams. She worked on big academic challenges right after exercising, and exercised or took a short walk on breaks to re-energize and re-focus herself. She memorized things to songs or chants, usually out loud, which helped her memorizing process. She drew diagrams and pictures to help her remember things, and she made good use of study buddies and study groups, especially for exam preparation. And it worked! Her grades improved markedly, and with them, her sense of competence and accomplishment.

One thing Milrod brought to Susan's attention was the physical disconnect of living forty-five minutes off-campus. Without the symbiotic energy of her medical-school peers, it was too easy for Susan to drift away from her studies. With new respect for her ADHD brain's needs, Susan sublet a bedroom in a house next to campus (for weeknights), thereby surrounding herself with peers who could help her keep her schoolwork front and center.

Pay attention to your psyche

Susan also realized that her academic load was extremely draining, and that she felt energized when engaged in student advocacy work. During her first year, however, she had overcommitted to too many groups and her studies had suffered. When she limited herself to just a few groups, she felt more balanced, and these diversions left her refreshed and more able to work productively at her studies.

Another important psychological breakthrough for Susan was realizing that she worked best in twenty-minute bursts, followed by a five-minute walk or other diversion. Using a timer, she could cycle through this pattern for up to six hours of solid, productive

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work—a major improvement over years of trying to work for much longer periods of time, becoming overwhelmed, and then quitting.

Always consider medications

A bad experience with one stimulant medication when she was first diagnosed had led Susan to conclude that she should avoid medication. Her coach was able to educate her much more fully about the variety of ADHD medications,

however, offering her reams of information and encouragement. Susan then located an ADHD-knowledgeable doctor, and after some trial and error, they identified a medication to which she responded very well. She also learned that the doctor could add a short-acting stimulant to her regimen when she had an especially difficult assignment to complete. Just knowing this

resource was available if she needed it eliminated the old panic she used to feel that led to paralyzing procrastination.

And the outcome? Susan finished her second year of medical school with flying colors, achieving a high pass (very close to honors) in one of her subjects. Further, during her long months of adapting to her ADHD diagnosis, Susan incorporated the necessary new behaviors and patterns into her life so effectively that, as a third-year resident, she no longer needs a coach. She is energized by the stimulating hospital environment. Patients love her empathic, warm, and caring personality, and the doctors with whom she works give her the highest ratings. Susan accepts and embraces her ADHD, saying, “You cannot separate me from my ADHD. It’s the reason I have great ideas and think outside the box. I refuse to see it as a disability!”

Susan’s coach is thrilled with her client’s highly successful outcome, but adds one last thought: “I think it’s terribly sad that someone who is this accomplished and this triumphant must remain anonymous. Having Susan share candidly how she’s been able to accept the challenges and embrace the gifts of ADHD would be powerful, positive, and empowering. Her concern, that disclosing her identity could negatively impact her ability to get a residency and complete her degree, is unacceptable. Let us hope that a new generation of physicians will help de-stigmatize ADHD enough to enable a successful medical student with ADHD to tell her story openly and honestly.” 